

Highlights from March 2024 FSA Board Meeting

Regulated Products Reform update

The [Food Standards Agency Board met yesterday](#), Wednesday 20 March 2024, to consider proposed changes to its Regulated Products Service (RPS). This followed agreement by the Board in 2023 that the FSA would develop plans to improve the current system to ensure consumers have quicker access to a wider choice of safe, innovative products.

Certain food and feed products, called regulated products, require authorisation before they can be sold in the UK. They're assessed to check they're safe before being placed on the UK market. To do this the FSA, with Food Standards Scotland (FSS), carry out a risk analysis process and provide advice to ministers in England, Wales and Scotland, who decide whether the product can be sold. The current authorisation process was inherited from the EU and the FSA Board has agreed that significant change will be necessary to achieve a high-quality service that can keep up with the pace of innovation in the food industry.

The Board supported two proposals for legislative reform which would help streamline the authorisation process. The first proposal is the removal of the requirement that some products previously authorised as safe must go through a reauthorisation process periodically, regardless of whether evidence on safety has changed. The second is a proposed change to allow authorisations to come into force via an official register, rather than by secondary legislation. The Board agreed that the changes would not compromise consumer safety.

The Board endorsed some further administrative improvements that can be made to the current system quickly and will have immediate benefits for consumers and businesses by reducing the time it takes to review and potentially authorise new products. The Board were also keen to move quickly with more fundamental changes to the current system and asked for further plans for this longer-term reform to be brought to the Board meeting in June 2024.

Professor Susan Jebb, Chair of the FSA explained that the changes proposed will enable a better outcome for consumers in the future.

This is a huge opportunity for the FSA to drive benefits for consumers by enabling new and innovative products that we assess as being safe to come to market more quickly. It will set a new way of doing things that will be viewed with real interest by regulators around the world.

At the June Board meeting we expect to see detailed proposals for the next steps, including how the FSA might further use other regulators' opinions when assessing risks, and an outline of the potential longer-term structure of the Regulated Products Service. This is an exciting time for the FSA and a real opportunity for us to make a difference.

Professor Susan Jebb, Chair of the FSA

Subject to ministerial agreement, the FSA will launch a public consultation in the Spring on the first two proposed changes – the removal of the requirement of renewals and to allow authorisations to come into force by official register. Any interested party, including consumers and industry, will be invited to respond so we can gauge views on the potential impact, benefits, risk and challenges around the changes. Responses will then be considered and will inform final proposals to ministers in the Summer.

Foodborne disease policy

Foodborne disease is a core part of the FSA's work that requires constant vigilance to help reduce the risk to consumers. The Board were given an overview of foodborne disease in the UK and how the FSA and others throughout the food chain are mitigating the associated risks.

In response to recent media reports about an increase in hospitalisations linked to food poisoning, Professor Robin May, FSA Chief Scientific Adviser, explained that overall hospitalisations for gastrointestinal disease in England are lower now than they were prior to the Covid pandemic. However, better testing has led to more cases being attributed to specific pathogens like *Salmonella* or *Campylobacter* rather than remaining undiagnosed.

Professor May also pointed out that the proportion of patients with a diagnosed *Salmonella* or *Campylobacter* infection who were being treated in hospital has increased over the same period. Potential reasons may include changes in testing methodology, an ageing population at more risk of getting seriously unwell, or people waiting longer before seeking clinical help and therefore having more advanced infections at the point of diagnosis. But Professor May stressed that more data is needed to understand the reasons for this apparent increase in the probability of hospitalisation.

It's important to understand that an increase in a particular infection from a pathogen is not necessarily indicative of a change in overall disease.

We need to know more about where that disease is coming from – whether that is from food or from other transmissions such as animal to person or person to person – so we can do our best to minimise it.

Professor Robin May, FSA Chief Scientific Adviser